

# EXHIBIT “G”

ap 16, 2013 by STF

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WILMINGTON EMERGENCY PHYSICIANS  
PO BOX 3012  
WILMINGTON DE 19804

8884566062

Tax ID: 232624943

## Statement of Account

Account No: 00000000

Patient : STRINGER, ABRAHAM

Resp Party: STRINGER, ABRAHAM

Address : 609 OAKFIELD LANE

Address : 609 OAKFIELD LANE

Develop :

Develop :

City : PHILA

City : PHILA

State : PA Zip: 19115

State : PA Zip: 19115

Phone : 215-698-7511

Phone : 215-698-7511

Birth dt: 11/14/50

Birth dt: 11/14/50

Prim Dr: 924 STEVEN F. FISHER, M

lag: 786.50 CHEST PAIN

lag: 789.06 EPIGASTRIC ABD PAIN

| Date    | Code Mod | Description             | Charge | Pat/Adj |
|---------|----------|-------------------------|--------|---------|
| 2/22/12 | 99285    | EMERGENCY DEPT VISIT    | 478.00 |         |
| 3/22/12 |          | INDEPENDENCE BLUE CROSS |        | 213.23  |
| 2/22/12 |          | INDEPENDENCE BLUE CROSS |        | 264.77  |

Chgs: 478.00 Credits: 478.00 Bal: .00